



## PART B - FEE(S) TRANSMITTAL

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7590

05/11/2004

Fulbright & Jaworski LLP  
600 Congress Avenue Suite 2400  
Austin, TX 78701

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Steven L. Highlander, Esq.	(Depositor's name)
	(Signature)
August 11, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/609,301	06/30/2000	Donald L. Morton	JWC1:031US	2510

TITLE OF INVENTION: NOVEL METHODS FOR LYMPH NODE IDENTIFICATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	08/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAUCIER, SANDRA E	1651	435-405000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Fulbright &amp; Jaworski LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

John Wayne Cancer Institute

Santa Monica, CA 90404

Please check the appropriate assignee category or categories (will not be printed on the patent); ☒ individual ☐ corporation or other private group entity ☐ government**4a. The following fee(s) are enclosed:**☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10**4b. Payment of Fee(s):**☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1212/JWC1-031US/STN (attach a copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

08/11/04

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